

PATENT APPLICATION FEE DETERMINATION RECORD  
Effective October 1, 2003

Application or Docket Number

101790077

0° 77

CLAIMS AS FILED - PART I

	(Column 1)	(Column 2)
TOTAL CLAIMS	3	
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	3 minus 20 =	
INDEPENDENT CLAIMS	minus 3 =	
MULTIPLE DEPENDENT CLAIM PRESENT		<input type="checkbox"/>

\* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	3	Minus 20	= —
Independent	1	Minus 3	= —
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

SMALL ENTITY TYPE	OTHER THAN SMALL ENTITY
RATE	FEES
BASIC FEE	385.00
XS 9=	<input type="checkbox"/> OR BASIC FEE 770.00
X43=	<input type="checkbox"/> OR XS18=
-145=	<input type="checkbox"/> OR X86=
TOTAL	385 <input type="checkbox"/> OR TOTAL

SMALL ENTITY	OTHER THAN SMALL ENTITY
RATE	ADDITIONAL FEE
XS 9=	<input type="checkbox"/> OR XS18=
X43=	<input type="checkbox"/> OR X86=
+145=	<input type="checkbox"/> OR +290=
TOTAL ADDIT. FEE	<input type="checkbox"/> OR TOTAL ADDIT. FEE

AMENDMENT B	(Column 1)	(Column 2)	(Column 3)	RATE	ADDITIONAL FEE	RATE	ADDITIONAL FEE
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA				
Total	Minus	20	=	XS 9=	<input type="checkbox"/>	XS18=	<input type="checkbox"/>
Independent	Minus	3	=	X43=	<input type="checkbox"/>	X86=	<input type="checkbox"/>
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>				+145=	<input type="checkbox"/>	+290=	<input type="checkbox"/>
				TOTAL ADDIT. FEE	<input type="checkbox"/>	TOTAL ADDIT. FEE	<input type="checkbox"/>

AMENDMENT C	(Column 1)	(Column 2)	(Column 3)	RATE	ADDITIONAL FEE	RATE	ADDITIONAL FEE
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA				
Total	Minus	20	=	XS 9=	<input type="checkbox"/>	XS18=	<input type="checkbox"/>
Independent	Minus	3	=	X43=	<input type="checkbox"/>	X86=	<input type="checkbox"/>
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>				+145=	<input type="checkbox"/>	+290=	<input type="checkbox"/>
				TOTAL ADDIT. FEE	<input type="checkbox"/>	TOTAL ADDIT. FEE	<input type="checkbox"/>

- \* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
- If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".
- If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".
- The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.